

# WALKER DRILLING SERVICES, INC.

## REPORT OF DRILLED WELL

DRILLING CONTRACTOR

License Number

Address

Zip Code

Date

JACK RAINER

P.O. Box 122

PARRISH, AL

Zip Code

PROPERTY OWNER

Address (mailing)

WALKER

16

NE

155

7W

WELL LOCATION

County

Section

1/4 Section

Township

Range ---or:

Hwy 269 Parrish, 60 south, car wash on left side of Rd,

Distance and direction from nearest town, community, road junction or other reference point

WELL WILL BE USED FOR:

☐

Private

supply

☐

Public

supply

☒

Industrial

supply

☐

Test

well

☐

Irrigation

Other: \_\_\_\_\_

02-26-02

Estimated

starting

date

Drilling method:  
(check)

Cable tool

Rotary

Jetted

Bored

Other: \_\_\_\_\_

6"

Diameter of well

300'

Estimated

depth

Bryan K Brown  
SIGNATURE of Drilling Contractor

Total Depth

355

Completion Date

2-26-02

| Interval | Description of cuttings | Interval | Description of cuttings | Completion date: report depths below ground level |                                                                                                                                                |                                          |                                           |                                           |                                       |
|----------|-------------------------|----------|-------------------------|---------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-------------------------------------------|-------------------------------------------|---------------------------------------|
| 0        | SPoils                  |          |                         | Pump                                              | Type: <input type="checkbox"/> Turb. <input type="checkbox"/> Subm. <input type="checkbox"/> Jet <input type="checkbox"/> Cyl.; Other: _____   |                                          |                                           |                                           |                                       |
| 14       | SSR                     |          |                         |                                                   | Intake depth: _____ H.P. _____ Yield _____ gpm                                                                                                 |                                          |                                           |                                           |                                       |
| 16       | HSR                     |          |                         | Capacity                                          | Tested by: <input type="checkbox"/> pumping <input type="checkbox"/> air lift <input type="checkbox"/> bailer <input type="checkbox"/> none    |                                          |                                           |                                           |                                       |
| 58       | Shale 4/5 ss stks       |          |                         |                                                   | Measured Static Water Level _____ ft.                                                                                                          |                                          |                                           |                                           |                                       |
| 80       | HSR                     |          |                         |                                                   | Measured pumping level _____ ft. after _____ hrs. pumping _____ gpm                                                                            |                                          |                                           |                                           |                                       |
| 97       | COAL                    |          |                         |                                                   | Development time prior to testing _____ hrs.                                                                                                   |                                          |                                           |                                           |                                       |
| 97.6     | Shale 4/5 ss stks       |          |                         | Finish                                            | <input type="checkbox"/> Open hole <input type="checkbox"/> Screened <input type="checkbox"/> Slotted pipe <input type="checkbox"/> Gravel pk. |                                          |                                           |                                           |                                       |
| 355      | O.W.                    |          |                         |                                                   | Interval(s) screened: _____ to _____ ft.                                                                                                       |                                          |                                           |                                           |                                       |
| 360      | T.D.                    |          |                         |                                                   | _____ to _____; _____ to _____ ft.                                                                                                             |                                          |                                           |                                           |                                       |
|          |                         |          |                         |                                                   | Packer(s) set at _____ and _____ ft.                                                                                                           |                                          |                                           |                                           |                                       |
|          |                         |          |                         |                                                   | Screen: diam. _____; Size openings _____                                                                                                       |                                          |                                           |                                           |                                       |
|          |                         |          |                         | Casing                                            | Interval cased                                                                                                                                 | Diam. (Inches)                           | *Type pipe                                | *Type couplings                           | Interval grouted                      |
|          |                         |          |                         |                                                   | 0-20                                                                                                                                           | 6"                                       | PVC                                       |                                           |                                       |
|          |                         |          |                         |                                                   |                                                                                                                                                |                                          |                                           |                                           |                                       |
|          |                         |          |                         |                                                   | *Couplings: Threaded & Coupled (T&C) Welded (W)<br>Threaded & coupled & welded (TC&W)                                                          |                                          |                                           |                                           |                                       |
|          |                         |          |                         |                                                   | Other: _____                                                                                                                                   |                                          |                                           |                                           |                                       |
|          |                         |          |                         |                                                   | *Pipe: Black; PVC; Galv.; Other: _____                                                                                                         |                                          |                                           |                                           |                                       |
|          |                         |          |                         | Quality                                           | Water analysis obtained? (check)                                                                                                               | <input type="checkbox"/> No              | <input type="checkbox"/> Bacteriological  | <input type="checkbox"/> Chemical         |                                       |
|          |                         |          |                         |                                                   | Analysis by:                                                                                                                                   | <input type="checkbox"/> Ala Geol. Surv. | <input type="checkbox"/> U.S. Geol. Surv. | <input type="checkbox"/> Ala Health Dept. | <input type="checkbox"/> Private lab. |
|          |                         |          |                         |                                                   | Signed: _____                                                                                                                                  |                                          |                                           |                                           |                                       |

\*For deeper well please attach continuation sheet.



# REPORT OF DRILLED WELL

u

|                     |                |                   |             |          |
|---------------------|----------------|-------------------|-------------|----------|
| DRILLING CONTRACTOR | License Number | Address           | Zip Code    | Date     |
| PROPERTY OWNER      |                | Address (mailing) |             | Zip Code |
| WELL LOCATION       | County         | Section           | 1/4 Section | Township |
| Range ---or:        |                |                   |             |          |

Distance and direction from nearest town, community, road junction or other reference point

WELL WILL BE USED FOR:

☐ Private supply

☐ Public supply

☐ Industrial supply

☐ Test well

☐ Irrigation

Other: \_\_\_\_\_

Estimated starting date

Drilling method: (check)

Cable tool  
Rotary  
Jetted  
Bored

Other: \_\_\_\_\_

Diameter of well

Estimated depth

SIGNATURE of Drilling Contractor

Total Depth \_\_\_\_\_

Completion Date \_\_\_\_\_

| Interval       | Description of cuttings | Interval   | Description of cuttings | Completion date: report depths below ground level                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|----------------|-------------------------|------------|-------------------------|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|----------------|----------------|------------|-----------------|------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|                |                         |            |                         | Pump                                                                               | Type: <input type="checkbox"/> Turb. <input type="checkbox"/> Subm. <input type="checkbox"/> Jet <input type="checkbox"/> Cyl.; Other: _____                                                                                                                                                                                                                                                                                                                                                          |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    | Intake depth _____ H.P. _____ Yield _____ gpm                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         | Capacity                                                                           | Tested by: <input type="checkbox"/> pumping <input type="checkbox"/> air lift <input type="checkbox"/> bailer <input type="checkbox"/> none                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    | Measured Static Water Level _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    | Measured pumping level _____ ft. after _____ hrs. pumping _____ gpm                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    | Development time prior to testing _____ hrs.                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         | Finish                                                                             | <input type="checkbox"/> Open hole <input type="checkbox"/> Screened <input type="checkbox"/> Slotted pipe <input type="checkbox"/> Gravel pk.                                                                                                                                                                                                                                                                                                                                                        |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    | Interval(s) screened: _____ to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    | _____ to _____; _____ to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    | Packer(s) set at _____ and _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         | Casing                                                                             | Screen: diam. _____; Size openings _____                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Interval cased</th> <th style="width: 15%;">Diam. (Inches)</th> <th style="width: 15%;">*Type pipe</th> <th style="width: 15%;">*Type couplings</th> <th style="width: 15%;">Interval grouted</th> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> |  |  |  |  | Interval cased | Diam. (Inches) | *Type pipe | *Type couplings | Interval grouted |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Interval cased | Diam. (Inches)          | *Type pipe | *Type couplings         |                                                                                    | Interval grouted                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         | *Couplings: Threaded & Coupled (T&C) Welded (W) Threaded & coupled & welded (TC&W) |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         | Other: _____                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         | Quality                                                                            | *Pipe: Black; PVC; Galv.; Other: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    | Water analysis obtained? (check) <input type="checkbox"/> No <input type="checkbox"/> Bacteriological <input type="checkbox"/> Chemical                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    | Analysis by: <input type="checkbox"/> Ala Geol. Surv. <input type="checkbox"/> U.S. Geol. Surv. <input type="checkbox"/> Ala Health Dept. <input type="checkbox"/> Private lab.                                                                                                                                                                                                                                                                                                                       |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                    | Signed: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

RECEIVED

JUL 31 1976

ALABAMA WATER WELLS  
STANDARDS BOARD

\*For deeper well please attach continuation sheet.



# REPORT OF DRILLED WELL

U C & C Drilling 242 Rt. 5, Box 667 Jasper, Al. 35501-7/14/88  
 DRILLING CONTRACTOR License Number Address Zip Code Date  
 W.C. Temple Rt. 2, Box 522 Cordova, Al. 35550  
 PROPERTY OWNER Address (mailing) Zip Code  
 Deason Hill Walker 12 15 7  
 WELL LOCATION County Section 1/4 Section Township Range ---or:

Distance and direction from nearest town, community, road junction or other reference point

WELL WILL BE USED FOR:



Private supply



Public supply



Industrial supply



Test well



Irrigation

Other: \_\_\_\_\_

7/14/88

Estimated starting date

Drilling method: (check)

Cable tool ☒

Rotary

Jetted

Bored

Other: \_\_\_\_\_

6"

Diameter of well

180'

Estimated depth

Greg Chamness  
 SIGNATURE of Drilling Contractor

Total Depth 200'

Completion Date 7/19/88

| Interval | Description of cuttings | Interval | Description of cuttings | Completion date: report depths below ground level |                                                                                                                                                                                 |                   |                |                 |                  |
|----------|-------------------------|----------|-------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------|-----------------|------------------|
| 17'      | soil                    |          |                         | Pump                                              | Type: <input type="checkbox"/> Turb. <input checked="" type="checkbox"/> Subm. <input type="checkbox"/> Jet <input type="checkbox"/> Cyl.; Other: _____                         |                   |                |                 |                  |
| 23'      | shale                   |          |                         |                                                   | Intake depth _____ H.P. _____ Yield _____ gpm                                                                                                                                   |                   |                |                 |                  |
| 70'      | sandrock                |          |                         | Capacity                                          | Tested by: <input type="checkbox"/> pumping <input type="checkbox"/> air lift <input checked="" type="checkbox"/> bailer <input type="checkbox"/> none                          |                   |                |                 |                  |
| 60'      | shale                   |          |                         |                                                   | Measured Static Water Level _____ ft.                                                                                                                                           |                   |                |                 |                  |
| 30'      | sandrock                |          |                         |                                                   | Measured pumping level _____ ft. after _____ hrs. pumping 10 gpm                                                                                                                |                   |                |                 |                  |
|          |                         |          |                         |                                                   | Development time prior to testing _____ hrs.                                                                                                                                    |                   |                |                 |                  |
|          |                         |          |                         | Finish                                            | <input checked="" type="checkbox"/> Open hole <input type="checkbox"/> Screened <input type="checkbox"/> Slotted pipe <input type="checkbox"/> Gravel pk.                       |                   |                |                 |                  |
|          |                         |          |                         |                                                   | Interval(s) screened: _____ to _____ ft.                                                                                                                                        |                   |                |                 |                  |
|          |                         |          |                         |                                                   | _____ to _____; _____ to _____ ft.                                                                                                                                              |                   |                |                 |                  |
|          |                         |          |                         |                                                   | Packer(s) set at _____ and _____ ft.                                                                                                                                            |                   |                |                 |                  |
|          |                         |          |                         |                                                   | Screen: diam. _____; Size openings _____                                                                                                                                        |                   |                |                 |                  |
|          |                         |          |                         | Casing                                            | Interval cased 20'                                                                                                                                                              | Diam. (inches) 6" | *Type pipe PVC | *Type couplings | Interval grouted |
|          |                         |          |                         |                                                   |                                                                                                                                                                                 |                   |                |                 |                  |
|          |                         |          |                         |                                                   |                                                                                                                                                                                 |                   |                |                 |                  |
|          |                         |          |                         |                                                   | *Couplings: Threaded & Coupled (T&C) Welded (W) Threaded & coupled & welded (TC&W)                                                                                              |                   |                |                 |                  |
|          |                         |          |                         |                                                   | Other: _____                                                                                                                                                                    |                   |                |                 |                  |
|          |                         |          |                         |                                                   | *Pipe: Black; PVC; Galv.; Other: _____                                                                                                                                          |                   |                |                 |                  |
|          |                         |          |                         | Quality                                           | Water analysis obtained? (check) <input type="checkbox"/> No <input type="checkbox"/> Bacteriological <input type="checkbox"/> Chemical                                         |                   |                |                 |                  |
|          |                         |          |                         |                                                   | Analysis by: <input type="checkbox"/> Ala Geol. Surv. <input type="checkbox"/> U.S. Geol. Surv. <input type="checkbox"/> Ala Health Dept. <input type="checkbox"/> Private lab. |                   |                |                 |                  |
|          |                         |          |                         |                                                   | Signed: Greg Chamness                                                                                                                                                           |                   |                |                 |                  |

\*For deeper well please attach continuation sheet.

# REPORT OF DRILLED WELL

64

**C & C Drilling Co.** 242 Rt. 6, Box 336 Jasper, Ala. 35501-2/11/74  
 DRILLING CONTRACTOR License Number Address Zip Code Date  
**De Wayne A. Key** Rt. 1 Parrish, Ala. 35580  
 PROPERTY OWNER Address (mailing) Zip Code  
**Parrish** **Walber**  
 WELL LOCATION County Section 1/4 Section Township Range ---or:

Distance and direction from nearest town, community, road junction or other reference point

WELL WILL BE USED FOR:

☒ Private supply ☐ Public supply ☐ Industrial supply ☐ Test well  
☐ Irrigation Other: \_\_\_\_\_

2/11/74  
 Estimated starting date

Drilling method: (check)

Cable tool  
 Rotary ☒  
 Jetted  
 Bored

6"  
 Diameter of well

200  
 Estimated depth

**James E. Chamness**  
 SIGNATURE of Drilling Contractor

Total Depth **295**

Completion Date **2/12/74**

| Interval | Description of cuttings | Interval | Description of cuttings | Completion date: report depths below ground level |                                                                                                                                                                                 |                                                                                                        |            |                 |                  |
|----------|-------------------------|----------|-------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|------------|-----------------|------------------|
| 85       | Soil                    |          |                         | Pump                                              | Type: <input type="checkbox"/> Turb. <input checked="" type="checkbox"/> Subm. <input type="checkbox"/> Jet <input type="checkbox"/> Cyl.; Other: _____                         |                                                                                                        |            |                 |                  |
| 40       | Sandrock                |          |                         |                                                   | Intake depth _____ H.P. _____ Yield _____ gpm                                                                                                                                   |                                                                                                        |            |                 |                  |
| 50       | Shale                   |          |                         | Capacity                                          | Tested by: <input type="checkbox"/> pumping <input checked="" type="checkbox"/> air lift <input type="checkbox"/> bailer <input type="checkbox"/> none                          |                                                                                                        |            |                 |                  |
| 120      | Sandrock                |          |                         |                                                   | Measured Static Water Level _____ ft.                                                                                                                                           |                                                                                                        |            |                 |                  |
|          |                         |          |                         |                                                   | Measured pumping level _____ ft. after _____ hrs. pumping _____ gpm                                                                                                             |                                                                                                        |            |                 |                  |
|          |                         |          |                         |                                                   | Development time prior to testing _____ hrs.                                                                                                                                    |                                                                                                        |            |                 |                  |
|          |                         |          |                         | Finish                                            | <input checked="" type="checkbox"/> Open hole <input type="checkbox"/> Screened <input type="checkbox"/> Slotted pipe <input type="checkbox"/> Gravel pk.                       |                                                                                                        |            |                 |                  |
|          |                         |          |                         |                                                   | Interval(s) screened: _____ to _____ ft.; _____ to _____; _____ to _____ ft.                                                                                                    |                                                                                                        |            |                 |                  |
|          |                         |          |                         |                                                   | Packer(s) set at _____ and _____ ft.                                                                                                                                            |                                                                                                        |            |                 |                  |
|          |                         |          |                         |                                                   | Screen: diam. _____; Size openings _____                                                                                                                                        |                                                                                                        |            |                 |                  |
|          |                         |          |                         | Casing                                            | Interval cased                                                                                                                                                                  | Diam. (Inches)                                                                                         | *Type pipe | *Type couplings | Interval grouted |
|          |                         |          |                         |                                                   | 25'                                                                                                                                                                             | 6"                                                                                                     |            | plastic         |                  |
|          |                         |          |                         |                                                   | *Couplings: Threaded & Coupled (T&C) Welded (W) Threaded & coupled & welded (TC&W)                                                                                              |                                                                                                        |            |                 |                  |
|          |                         |          |                         |                                                   | Other: _____                                                                                                                                                                    |                                                                                                        |            |                 |                  |
|          |                         |          |                         |                                                   | *Pipe: Black; PVC; Galv.; Other: _____                                                                                                                                          |                                                                                                        |            |                 |                  |
|          |                         |          |                         | Quality                                           | Water analysis obtained? (check)                                                                                                                                                | <input type="checkbox"/> No <input type="checkbox"/> Bacteriological <input type="checkbox"/> Chemical |            |                 |                  |
|          |                         |          |                         |                                                   | Analysis by: <input type="checkbox"/> Ala Geol. Surv. <input type="checkbox"/> U.S. Geol. Surv. <input type="checkbox"/> Ala Health Dept. <input type="checkbox"/> Private lab. |                                                                                                        |            |                 |                  |
|          |                         |          |                         |                                                   | Signed: <b>James E. Chamness</b>                                                                                                                                                |                                                                                                        |            |                 |                  |

\*For deeper well please attach continuation sheet.

GEOLOGICAL SURVEY  
 STATE  
 OIL AND GAS BOARD  
 MAR 11 9 21 AM '74  
 RECEIVED

# REPORT OF DRILLED WELL

35

Drilling Contractor: Wm D McCarty License Number: 178  
 Property Owner: Robert Earl Taylor Address: 103 Waverly Ave Address (mailing): Adamsville Ala 35005 Date: 7-31-73  
Walker Address (mailing): At #2 Zip Code: Ala. Zip Code:

WELL LOCATION County Section 1/4 Section Township Range ---or:

Distance and direction from nearest town, community, road junction or other reference point

WELL WILL BE USED FOR:

☒ Private supply

☐ Public supply

☐ Industrial supply

☐ Test well

☐ Irrigation

Other: \_\_\_\_\_

7-31-73

Estimated starting date

Drilling method: (check)

☒ Cable tool  
☐ Rotary  
☐ Jetted  
☐ Bored

Other: \_\_\_\_\_

Diameter of well

Estimated depth

Wm D McCarty  
SIGNATURE of Drilling Contractor

Total Depth 125'

Completion Date 8-9-73

| Interval | Description of cuttings | Interval | Description of cuttings | Completion date: report depths below ground level                                                                                                                                                                                                                                                                                       |
|----------|-------------------------|----------|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1-5      | clay                    |          |                         | Pump Type: <input type="checkbox"/> Turb. <input type="checkbox"/> Subm. <input type="checkbox"/> Jet <input type="checkbox"/> Cyl.; Other: _____<br>Intake depth _____ H.P. _____ Yield _____ gpm                                                                                                                                      |
| 6-18     | soft sand-rock          |          |                         |                                                                                                                                                                                                                                                                                                                                         |
| 18-125   | hard sand-rock          |          |                         | Capacity Tested by: <input type="checkbox"/> pumping <input type="checkbox"/> air lift <input checked="" type="checkbox"/> bailer <input type="checkbox"/> none<br>Measured Static Water Level _____ ft.<br>Measured pumping level _____ ft. after _____ hrs. pumping _____ gpm<br>Development time prior to testing _____ hrs.         |
|          |                         |          |                         |                                                                                                                                                                                                                                                                                                                                         |
|          |                         |          |                         | Finish <input checked="" type="checkbox"/> Open hole <input type="checkbox"/> Screened <input type="checkbox"/> Slotted pipe <input type="checkbox"/> Gravel pk.<br>Interval(s) screened: _____ to _____ ft.;<br>_____ to _____; _____ to _____ ft.<br>Packer(s) set at _____ and _____ ft.<br>Screen: diam. _____; Size openings _____ |
|          |                         |          |                         |                                                                                                                                                                                                                                                                                                                                         |
|          |                         |          |                         | Casing Interval cased Diam. (Inches) *Type pipe *Type couplings Interval grouted<br><u>23'</u> <u>6"</u> <u>black</u><br>_____<br>_____<br>_____<br>*Couplings: Threaded & Coupled (T&C) Welded (W)<br>Threaded & coupled & welded (TC&W)<br>Other: _____<br>*Pipe: Black; PVC; Galv.; Other: <u>Black</u>                              |
|          |                         |          |                         |                                                                                                                                                                                                                                                                                                                                         |
|          |                         |          |                         | Quality Water analysis obtained? (check) <input type="checkbox"/> No <input type="checkbox"/> Bacteriological <input type="checkbox"/> Chemical<br>Analysis by: <input type="checkbox"/> Ala Geol. Surv. <input type="checkbox"/> U.S. Geol. Surv.<br><input type="checkbox"/> Ala Health Dept. <input type="checkbox"/> Private lab.   |
|          |                         |          |                         |                                                                                                                                                                                                                                                                                                                                         |
|          |                         |          |                         | Signed: <u>Wm D McCarty</u>                                                                                                                                                                                                                                                                                                             |

\*For deeper well please attach continuation sheet.

U or V ?

## REPORT OF DRILLED WELL

✓ 12

C & C Drilling Co. 242 Rt. 6, Box 336 Jasper, Ala. 35501 5/18/74

DRILLING CONTRACTOR

License Number

Address

Zip Code

Date

J. H. Carr

PROPERTY OWNER

Address (mailing)

Zip Code

Mt Pisgah Walker

WELL LOCATION

County

Section

1/4 Section

Township

Range ---or:

Below Cordova on Parrish Hwy

Distance and direction from nearest town, community, road junction or other reference point

WELL WILL BE USED FOR:

☒ Private  
supply

☐ Public  
supply

☐ Industrial  
supply

☐ Test  
well

☐ Irrigation

Other: \_\_\_\_\_

5/13/74

Estimated  
starting  
dateDrilling method:  
(check)
☒ Cable tool  
☒ Rotary  
☐ Jetted  
☐ Bored

Other: \_\_\_\_\_

6" Diameter of well

400 Estimated  
depth

James E. Chamness  
SIGNATURE of Drilling Contractor

Total Depth 460

Completion Date 5/15/74

| Interval | Description of cuttings | Interval | Description of cuttings | Completion date: report depths below ground level |                                                                                                                                                                                 |  |  |  |  |
|----------|-------------------------|----------|-------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| 50'      | Soil                    |          |                         | Pump                                              | Type: <input type="checkbox"/> Turb. <input checked="" type="checkbox"/> Subm. <input type="checkbox"/> Jet <input type="checkbox"/> Cyl.; Other: _____                         |  |  |  |  |
| 70'      | Sandrock                |          |                         |                                                   | Intake depth 450 H.P. _____ Yield 5 gpm                                                                                                                                         |  |  |  |  |
| 100'     | Shale                   |          |                         | Capacity                                          | Tested by: <input type="checkbox"/> pumping <input checked="" type="checkbox"/> air lift <input type="checkbox"/> bailer <input type="checkbox"/> none                          |  |  |  |  |
| 120'     | Sandrock                |          |                         |                                                   | Measured Static Water Level _____ ft.                                                                                                                                           |  |  |  |  |
| 120'     | Shale                   |          |                         |                                                   | Measured pumping level _____ ft. after _____ hrs. pumping _____ gpm                                                                                                             |  |  |  |  |
|          |                         |          |                         | Finish                                            | Development time prior to testing _____ hrs.                                                                                                                                    |  |  |  |  |
|          |                         |          |                         |                                                   | <input type="checkbox"/> Open hole <input type="checkbox"/> Screened <input type="checkbox"/> Slotted pipe <input type="checkbox"/> Gravel pk.                                  |  |  |  |  |
|          |                         |          |                         |                                                   | Interval(s) screened: _____ to _____ ft.; _____ to _____; _____ to _____ ft.                                                                                                    |  |  |  |  |
|          |                         |          |                         | Casing                                            | Packer(s) set at _____ and _____ ft.                                                                                                                                            |  |  |  |  |
|          |                         |          |                         |                                                   | Screen: diam. _____; Size openings _____                                                                                                                                        |  |  |  |  |
|          |                         |          |                         |                                                   | Interval cased 30' Diam. (Inches) 6" *Type pipe plastic *Type couplings _____ Interval grouted _____                                                                            |  |  |  |  |
|          |                         |          |                         | Quality                                           | *Couplings: Threaded & Coupled (T&C) Welded (W) Threaded & coupled & welded (TC&W)                                                                                              |  |  |  |  |
|          |                         |          |                         |                                                   | Other: _____                                                                                                                                                                    |  |  |  |  |
|          |                         |          |                         |                                                   | *Pipe: Black; <u>PVC</u> Galv.; Other: _____                                                                                                                                    |  |  |  |  |
|          |                         |          |                         | Quality                                           | Water analysis obtained? (check) <input type="checkbox"/> No <input type="checkbox"/> Bacteriological <input type="checkbox"/> Chemical                                         |  |  |  |  |
|          |                         |          |                         |                                                   | Analysis by: <input type="checkbox"/> Ala Geol. Surv. <input type="checkbox"/> U.S. Geol. Surv. <input type="checkbox"/> Ala Health Dept. <input type="checkbox"/> Private lab. |  |  |  |  |
|          |                         |          |                         |                                                   | Signed: _____                                                                                                                                                                   |  |  |  |  |

\*For deeper well please attach continuation sheet.

**DRILLING CONTRACTOR**

**License Number**

**Address**

Zip Code

Date \_\_\_\_\_

**PROPERTY OWNER**

**Address (mailing)**

**Zip Code**

WELL LOCATION)

County

Section

**1/4 Section**

**Township**

Range ---or:

Distance and direction from nearest town, community, road junction or other reference point

WELL WILL BE USED FOR:

**Private supply**

Public supply

**Industrial  
supply**

**Test well**

### Irrigation

**Other:**

Estimated  
starting  
date

Drilling method:  
(check)

Cable tool  
Rotary  
Jetted  
Bored

**Other:**

Diameter of well

Estimate  
depth

**SIGNATURE of Drilling Contractor**

**Completion Date**

*[Signature]*

**Total Depth**

| Interval       | Description of cuttings | Interval   | Description of cuttings | Completion date: report depths below ground level                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|----------------|-------------------------|------------|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------|------------|-----------------|------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|                | Blue Gravel             |            |                         | Type: <input type="checkbox"/> Turb. <input type="checkbox"/> Subm. <input type="checkbox"/> Jet <input type="checkbox"/> Cyl.; Other: _____<br>Intake depth _____ H.P. _____ Yield _____ gpm<br>Tested by: <input type="checkbox"/> pumping <input type="checkbox"/> air lift <input type="checkbox"/> bailer <input type="checkbox"/> none<br>Measured Static Water Level _____ ft.<br>Measured pumping level _____ ft. after _____ hrs. pumping _____ gpm<br>Development time prior to testing _____ hrs.<br><input type="checkbox"/> Open hole <input type="checkbox"/> Screened <input type="checkbox"/> Slotted pipe <input type="checkbox"/> Gravel pack<br>Interval(s) screened: _____ to _____ ft.<br>_____ to _____; _____ to _____ ft.<br>Packer(s) set at _____ and _____ ft.<br>Screen: diam. _____; Size openings _____ |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         | <table border="1"> <thead> <tr> <th>Interval cased</th> <th>Diam. (Inches)</th> <th>*Type pipe</th> <th>*Type couplings</th> <th>Interval grouted</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> *Couplings: Threaded & Coupled (T&C) Welded (W)<br>Threaded & coupled & welded (TC&W)<br>Other: _____<br>*Pipe: Black; PVC; Galv.; Other: _____                                                                                                                                                                                                                                       | Interval cased | Diam. (Inches) | *Type pipe | *Type couplings | Interval grouted |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Interval cased | Diam. (Inches)          | *Type pipe | *Type couplings         | Interval grouted                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                |                         |            |                         | Water analysis obtained? (check) <input type="checkbox"/> No <input type="checkbox"/> Bacteriological <input type="checkbox"/> Chemical<br>Analysis by: <input type="checkbox"/> Ala Geol. Surv. <input type="checkbox"/> U.S. Geol. Surv. <input type="checkbox"/> Ala Health Dept. <input type="checkbox"/> Private lab.<br>Signed: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                |                |            |                 |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

\*For deeper well please attach continuation sheet.

# REPORT OF DRILLED WELL

**J & C Drilling** 467 Rt. 6 Box 498-K Jasper AL 35501 11-19-92  
 DRILLING CONTRACTOR License Number Address Zip Code Date  
**Edward Chappell**  
 PROPERTY OWNER Address (mailing) Zip Code  
**Walker** **9** **T15S** **R7W**  
 WELL LOCATION County Section 1/4 Section Township Range ---or:

Distance and direction from nearest town, community, road junction or other reference point

WELL WILL BE USED FOR:



Private supply



Public supply



Industrial supply



Test well



Irrigation

Other: \_\_\_\_\_

11-19-92

Estimated starting date

Drilling method: (check)

☐ Cable tool

☒ Rotary

☐ Jetted

☐ Bored

Other: \_\_\_\_\_

6"

Diameter of well

220'

Estimated depth

*Greg Chambers*

SIGNATURE of Drilling Contractor

Total Depth 200'

Completion Date 11-19-92

| Interval | Description of cuttings | Interval | Description of cuttings | Completion date: report depths below ground level |                                                                                                                                                                                 |  |  |  |  |
|----------|-------------------------|----------|-------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| 10'      | Overburden              |          |                         | Pump                                              | Type: <input type="checkbox"/> Turb. <input checked="" type="checkbox"/> Subm. <input type="checkbox"/> Jet <input type="checkbox"/> Cyl.; Other: _____                         |  |  |  |  |
| 40'      | Shale                   |          |                         |                                                   | Intake depth <u>195</u> H.P. <u>3/4</u> Yield <u>10</u> gpm                                                                                                                     |  |  |  |  |
| 70'      | White sand rock         |          |                         |                                                   | Tested by: <input type="checkbox"/> pumping <input checked="" type="checkbox"/> air lift <input type="checkbox"/> bailer <input type="checkbox"/> none                          |  |  |  |  |
| 80'      | Shale                   |          |                         | Capacity                                          | Measured Static Water Level _____ ft.                                                                                                                                           |  |  |  |  |
|          |                         |          |                         |                                                   | Measured pumping level _____ ft. after _____ hrs. pumping _____ gpm                                                                                                             |  |  |  |  |
|          |                         |          |                         |                                                   | Development time prior to testing <u>2</u> hrs.                                                                                                                                 |  |  |  |  |
|          |                         |          |                         | Finish                                            | <input checked="" type="checkbox"/> Open hole <input type="checkbox"/> Screened <input type="checkbox"/> Slotted pipe <input type="checkbox"/> Gravel pk.                       |  |  |  |  |
|          |                         |          |                         |                                                   | Interval(s) screened: _____ to _____ ft.                                                                                                                                        |  |  |  |  |
|          |                         |          |                         |                                                   | Packer(s) set at _____ and _____ ft.                                                                                                                                            |  |  |  |  |
|          |                         |          |                         | Casing                                            | Screen: diam. _____; Size openings _____                                                                                                                                        |  |  |  |  |
|          |                         |          |                         |                                                   | Interval cased <u>22'</u> Diam. (Inches) <u>6"</u> *Type pipe <u>PVC</u> *Type couplings <u>Glue</u> Interval grouted _____                                                     |  |  |  |  |
|          |                         |          |                         |                                                   | *Couplings: Threaded & Coupled (T&C) Welded (W) Threaded & coupled & welded (TC&W) Other: _____                                                                                 |  |  |  |  |
|          |                         |          |                         | Quality                                           | *Pipe: Black; PVC; Galv.; Other: _____                                                                                                                                          |  |  |  |  |
|          |                         |          |                         |                                                   | Water analysis obtained? (check) <input checked="" type="checkbox"/> No <input type="checkbox"/> Bacteriological <input type="checkbox"/> Chemical                              |  |  |  |  |
|          |                         |          |                         |                                                   | Analysis by: <input type="checkbox"/> Ala Geol. Surv. <input type="checkbox"/> U.S. Geol. Surv. <input type="checkbox"/> Ala Health Dept. <input type="checkbox"/> Private lab. |  |  |  |  |
|          |                         |          |                         | Signed: <i>Greg Chambers</i>                      |                                                                                                                                                                                 |  |  |  |  |

\*For deeper well please attach continuation sheet.



# REPORT OF DRILLED WELL

DRILLING CONTRACTOR Delma Baird License Number 389 Address Arley, Alabama 35541 Zip Code 35541 Date 11-15-78  
 PROPERTY OWNER Mary Argent Address (mailing) Jasper, Alabama Zip Code 35541  
 WELL LOCATION Boldo Walker County Walker Section 14S 1/4 Section 7W Township 7W Range ----or:

Distance and direction from nearest town, community, road junction or other reference point

WELL WILL BE USED FOR:

☒ Private supply  
☐ Public supply  
☐ Industrial supply  
☐ Test well  
☐ Irrigation Other: \_\_\_\_\_

Estimated starting date

Drilling method: (check)

☒ Cable tool  
☐ Rotary  
☐ Jetted  
☐ Bored

Other: \_\_\_\_\_

Diameter of well 6"

Estimated depth 140

SIGNATURE of Drilling Contractor

Completion Date 11-15-78

Total Depth 120

| Interval | Description of cuttings | Interval | Description of cuttings | Completion date: report depths below ground level |                                                                                                                                                                                 |                |            |                 |                  |
|----------|-------------------------|----------|-------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------|-----------------|------------------|
|          |                         |          |                         | Pump                                              | Type: <input type="checkbox"/> Turb. <input type="checkbox"/> Subm. <input type="checkbox"/> Jet <input type="checkbox"/> Cyl.; Other: _____                                    |                |            |                 |                  |
|          |                         |          |                         |                                                   | Intake depth _____ H.P. _____ Yield _____ gpm                                                                                                                                   |                |            |                 |                  |
|          |                         |          |                         | Capacity                                          | Tested by: <input type="checkbox"/> pumping <input type="checkbox"/> air lift <input type="checkbox"/> bailer <input type="checkbox"/> none                                     |                |            |                 |                  |
|          |                         |          |                         |                                                   | Measured Static Water Level _____ ft.                                                                                                                                           |                |            |                 |                  |
|          |                         |          |                         |                                                   | Measured pumping level _____ ft. after _____ hrs. pumping _____ gpm                                                                                                             |                |            |                 |                  |
|          |                         |          |                         | Finish                                            | Development time prior to testing _____ hrs.                                                                                                                                    |                |            |                 |                  |
|          |                         |          |                         |                                                   | <input type="checkbox"/> Open hole <input type="checkbox"/> Screened <input type="checkbox"/> Slotted pipe <input type="checkbox"/> Gravel pk.                                  |                |            |                 |                  |
|          |                         |          |                         |                                                   | Interval(s) screened: _____ to _____ ft.; _____ to _____; _____ to _____ ft.                                                                                                    |                |            |                 |                  |
|          |                         |          |                         | Casing                                            | Packer(s) set at _____ and _____ ft.                                                                                                                                            |                |            |                 |                  |
|          |                         |          |                         |                                                   | Screen: diam. _____; Size openings _____                                                                                                                                        |                |            |                 |                  |
|          |                         |          |                         |                                                   |                                                                                                                                                                                 |                |            |                 |                  |
|          |                         |          |                         | Quality                                           | Interval cased                                                                                                                                                                  | Diam. (Inches) | *Type pipe | *Type couplings | Interval grouted |
|          |                         |          |                         |                                                   |                                                                                                                                                                                 |                |            |                 |                  |
|          |                         |          |                         |                                                   |                                                                                                                                                                                 |                |            |                 |                  |
|          |                         |          |                         |                                                   | *Couplings: Threaded & Coupled (T&C) Welded (W) Threaded & coupled & welded (TC&W)                                                                                              |                |            |                 |                  |
|          |                         |          |                         |                                                   | Other: _____                                                                                                                                                                    |                |            |                 |                  |
|          |                         |          |                         |                                                   | *Pipe: Black; PVC; Galv.; Other: _____                                                                                                                                          |                |            |                 |                  |
|          |                         |          |                         |                                                   | Water analysis obtained? (check) <input type="checkbox"/> No <input type="checkbox"/> Bacteriological <input type="checkbox"/> Chemical                                         |                |            |                 |                  |
|          |                         |          |                         |                                                   | Analysis by: <input type="checkbox"/> Ala Geol. Surv. <input type="checkbox"/> U.S. Geol. Surv. <input type="checkbox"/> Ala Health Dept. <input type="checkbox"/> Private lab. |                |            |                 |                  |
|          |                         |          |                         |                                                   | Signed: _____                                                                                                                                                                   |                |            |                 |                  |

\*For deeper well please attach continuation sheet.